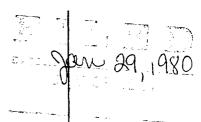


CANDIDATE AND OFFICEHOLDER CAMPAIGN STATEMENT — SHORT FORM

(Government Code Section 84200-84216)



For use by candidates and officeholders who receive or spend not more than \$200 or on whose behalf not more than \$200 has been raised or spent for the entire campaign.

OFFICIAL USE ONLY

(Type or Print in Ink)

NAME OF CANDIDATE: Walter Katnich			OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE): City Councilman		
919 Tara Place	Lodi	Cali	f. 95240	209	368-6042
BUSINESS ADDRESS: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
815 W. Lockeford St.	Lodi	Cali	f. 95240	209	369-7524
TYPE OF ELECTION (CIRCLE ONE IP APPLICABLE): PRIMARY GENERAL SPECIAL RECALL	CIRCLE IF APPLICABLE:		N/A		

VERIFICATION

I declare under penalty of perjury that to the best of my knowledge not more than \$200 has been received or expended on behalf of or in support of my candidacy, by myself or by any committee of which I have knowledge.

Watte Salman (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)